05/25/2011 15:58

Image# 11931525553

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Massachusetts Republican State Congressional Committee 85 Merrimac St. ADDRESS (number and street) Suite 400 Check if different than previously Boston MA 02114 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE A CITY A IS THIS NEW **AMENDED** C00042622 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Χ Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 02 0 1 2010 02 28 2010 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. **Brent Anderson** Type or Print Name of Treasurer Brent Anderson Electronically Filed by 05 24 2011 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

Page 2

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name Massachusetts Republican State Congressional Committee

D D <sup>®</sup>D 02 0 1 2010 0.2 28 2010 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 77412.05 January 1 (b) Cash on Hand at 344314.10 Begining of Reporting Period ..... 84900.50 1049990.50 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 429214.60 1127402.55 6(a) and 6(c) for Column B) ..... 154496.20 852684.15 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 274718.40 274718.40 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 5660.20 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

м м 0 2 0 1 м°м 0 2 2 8 2010 2010 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 72200.00 169309.00 (i) Itemized (use Schedule A) ...... 12700.50 23075.50 (ii) Unitemized ..... (iii) TOTAL (add 84900.50 192384.50 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 10000.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 84900.50 202384.50 Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other 847606.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 84900.50 1049990.50 12, 13, 14, 15, 16, 17, and 18(c)) ...... 20. Total Federal Receipts 84900.50 1049990.50 (subtract Line 18(c) from Line 19) .....

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### DETAILED SUMMARY PAGE

of Disbursements

FEC. Form 3X (Rev. 02/2003) Page 4

II. DISBURSEMENTS	COLUMN A	COLUMN B	
	Total This Period	Calendar Year-to-Date	
Operating Expenditures:     (a) Shared Federal/Non-Federal			
Activity (from Schedule H4) (i) Federal Share	0.00	0.00	
(ii) Non-Federal Share	0.00	0.00	
(b) Other Federal Operating  Expenditures	96278.16	162795.06	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	96278.16	162795.06	
Transfers to Affiliated/Other Party     Committees	0.00	0.00	
Contributions to     Federal Candidates/Committees     and Other Political Committees	0.00	0.00	
4. Independent Expenditure  (use Schedule E)	0.00	0.00	
5. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	47488.52	677026.52	
6. Loan Repayments Made	0.00	0.00	
7. Loans Made	0.00	0.00	
8. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
9. Other Disbursements	0.00	0.00	
	0.00	0.00	
Federal Election Activity (2 U.S.C 431(20))     (a) Shared Federal Election Activity			
(from Schedule H6) (i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	10729.52	12862.57	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	10729.52	12862.57	
11. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	154496.20	852684.15	
_	.01.100.20	332331.10	
<ol> <li>Total Federal Disbursements         (subtract Line 21(a)(ii) and Line 30(a)(ii)     </li> </ol>			
from Line 31)	154496.20	852684.15	

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	84900.50	202384.50
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
5.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	84900.50	202384.50
6.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	96278.16	162795.06
7.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
8.	Net Operating Expenditures (subtract Line 37 from Line 36)	96278.16	162795.06

FE6AN026

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 36 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  Massachusetts Republican State Cong	gressional C	ommittee	
Α.	Full Name (Last, First, Middle Initial)  Marie Angelides  Mailing Address 1200 Converse Street			Date of Receipt
	Maining Address 1200 Converse Street			02 24 2010
	City	State	Zip Code	Transaction ID: 00317.C178138
	Longmeadow  FEC ID number of contributing federal political committee.	C	01106	Amount of Each Receipt this Period 250.00
	Name of Employer Information Requested	Occupatio		
	Receipt For:		ion Requested	
	Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
— В.	Full Name (Last, First, Middle Initial) John Davis			Date of Receipt
	Mailing Address 101 Woodsley Road			0 2 1 1 2 0 1 0
	City	State	Zip Code	Transaction ID: 00217.C178058
	Longmeadow	MA	01106	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10000.00
	Name of Employer Ventry Industries	Occupatio CEO	n	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		10000.00	
с. С.	Full Name (Last, First, Middle Initial) David Emmerich	1		Date of Receipt
	Mailing Address 101 Shelton Rd.			0 2 2 4 2 0 1 0
	City	State	Zip Code	Transaction ID: 00317.C178142
	Swampscott	MA	01907	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer First Republic Bank	Occupatio Executive		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)			10750.00
r	TOTAL This Period (last page this line number		<u> </u>	

## SCHEDULE A (FEC Form 3X)

Mailing Address P.O. Box 127 15 Lakeview St.  City State Zip Code South Carver MA 02366  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	Date of Receipt    M M
A. Joel K Greenberg  Mailing Address 727 Marion Square Road  City State Zip Code  Gladwyne PA 19035  FEC ID number of contributing federal political committee.  Name of Employer SiG LLP  Receipt For: Primary General Other (specify) ▼ 10000.1  B. Clark Griffith  Mailing Address P.O. Box 127  15 Lakeview St.  City State Zip Code  MA 02366  FEC ID number of contributing federal political committee.  Name of Employer  Retried  Receipt For: MA 02366  FEC ID number of contributing federal political committee.  Name of Employer  Retried  Receipt For: Aggregate Year-to-Date ▼  Cupation  Retired  Receipt For: Aggregate Year-to-Date ▼  Primary General Other (specify) ▼ 300.1  Full Name (Last, First, Middle Initial)  Jeanne Kangas  Mailing Address 959 Hill Rd  City State Zip Code  MA 01719  FEC ID number of contributing	Transaction ID: 00317.C178305  Amount of Each Receipt this Period  10000.00
Gladwyne  FEC ID number of contributing federal political committee.  Name of Employer SIG LLP  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Clark Griffith  Mailing Address P.O. Box 127 15 Lakeview St.  City State Zip Code MA 02366  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify) ▼  Ccupation Retired  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Jeanne Kangas  Mailing Address 959 Hill Rd  City State Zip Code MA 01719  FEC ID number of contributing	Transaction ID: 00317.C178305  Amount of Each Receipt this Period  10000.00
Same of Employer   Sig LLP	0
Receipt For:  Primary Other (specify) ▼  Full Name (Last, First, Middle Initial) Clark Griffith Mailing Address P.O. Box 127 15 Lakeview St.  City South Carver MA 02366  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Jeanne Kangas Mailing Address 959 Hill Rd  City State Zip Code MA 02366  C  Aggregate Year-to-Date  Aggregate Year-to-Date  Tull Name (Last, First, Middle Initial) Jeanne Kangas Mailing Address 959 Hill Rd	
B. Clark Griffith  Mailing Address P.O. Box 127  15 Lakeview St.  City South Carver MA 02366  FEC ID number of contributing federal political committee.  Name of Employer Retired Receipt For: Primary Other (specify) ▼  Full Name (Last, First, Middle Initial) Jeanne Kangas Mailing Address 959 Hill Rd  City Boxborough FEC ID number of contributing	2. (2. )
FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Jeanne Kangas Mailing Address 959 Hill Rd  City State Zip Code Boxborough  FEC ID number of contributing	Date of Receipt    M M
Retired  Receipt For:  Primary  Other (specify) ▼  Aggregate Year-to-Date ▼  300.0  Full Name (Last, First, Middle Initial)  Jeanne Kangas  Mailing Address 959 Hill Rd  City  Boxborough  FEC ID number of contributing	Amount of Each Receipt this Period 100.00
C. Jeanne Kangas  Mailing Address 959 Hill Rd  City State Zip Code  Boxborough MA 01719  FEC ID number of contributing	0
Boxborough MA 01719  FEC ID number of contributing	Date of Receipt    M
FEC ID number of contributing	Transaction ID: 00217.C178070
rederal political committee.	Amount of Each Receipt this Period 5000.00
Name of Employer Arnold & Kangas, P.C.  Occupation Lawyer	
Receipt For:  Primary  General  Other (specify)   Aggregate Year-to-Date   5000.0	
SUBTOTAL of Receipts This Page (optional)	0

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 36 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  Massachusetts Republican State Cong	e name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Kurt Lanza Mailing Address PO Box 2178  City Littleton  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For:		Zip Code 01460 n ion Requested	Date of Receipt    M   M   D   D   2 6   2 0 1 0
Primary General Other (specify)  Full Name (Last, First, Middle Initial) Peter Maich	Aggregate	250.00	Date of Receipt
Mailing Address 15 Linden Drive  City  Cohasset  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For:  Primary General Other (specify) ▼	State MA  C  Occupation Retailer  Aggregate	Zip Code 02025 n • Year-to-Date ▼	Transaction ID: 00317.C178147  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Susan Mattes  Mailing Address 9 Hardy Road  City  Marlborough  FEC ID number of contributing federal political committee.  Name of Employer Astrazeneca R&D Boston  Receipt For:  Primary General Other (specify)		Zip Code 01752  n n Scientist e Year-to-Date  300.00	Date of Receipt  M M M / D D / 2 6 2 0 1 0  Transaction ID: 00317.C178398  Amount of Each Receipt this Period  300.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number			1050.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate scheduler for each category of the Detailed Summary Page	(check only one)
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  Massachusetts Republican State Co	the name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) James McManus Mailing Address 88 Chestnut St		Date of Receipt
City Weston	State Zip Code MA 02493	Transaction ID: 00217.C178076  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer Self Employed  Receipt For:	Occupation Commercial Real Estate Aggregate Year-to-Date	500.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	500.0	0
Albert Merck  Mailing Address 1010 Waltham St F-19		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: 00217.C178075
Lexington  FEC ID number of contributing federal political committee.	MA 02421	Amount of Each Receipt this Period 15000.00
Name of Employer Retired	Occupation Retired	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.0	0
Full Name (Last, First, Middle Initial) Peter Monaco		Date of Receipt
Mailing Address 311 Marlborough St		02 25 2010
City	State Zip Code	Transaction ID: 00317.C178252
Boston FEC ID number of contributing federal political committee.	MA 02116	Amount of Each Receipt this Period  15000.00
Name of Employer Raptor Capitol Management	Occupation Director	
Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.0	0 "
SUBTOTAL of Receipts This Page (optional	)	30500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 10 / 36   (check only one)     X   11a     11b     11c   12   13   14     15   16
Any information copied from such Reports and or for commercial purposes, other than using the such as	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Co	ongressional C	ommittee	
Full Name (Last, First, Middle Initial) Peter Monaco			Date of Receipt
Mailing Address 311 Marlborough St.			M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Boston	State MA	Zip Code 02116	Transaction ID: 00317.C178288
FEC ID number of contributing federal political committee.	C	02110	Amount of Each Receipt this Period -5000.00
Name of Employer Raptor Capitol Management	Occupatio Director	n	
Receipt For:  Primary General  Other (specify) ▼	<del>-   '</del>	e Year-to-Date ▼ -5000.00	
Full Name (Last, First, Middle Initial) James Murray			Date of Receipt
Mailing Address 700 East Main St.			0 2 2 4 2 0 1 0
City	State	Zip Code	Transaction ID: 00317.C178132
Saint Charles  FEC ID number of contributing federal political committee.	C	60174	Amount of Each Receipt this Period 500.00
Name of Employer Information Requested	Occupatio	n on Requested	
Receipt For:  Primary General  Other (specify) ▼	·	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) H. Bradlee Perry			Date of Receipt
Mailing Address 865 Central Avenue K-109			0 2 2 6 2 0 1 0
City Needham	State MA	Zip Code 02492	Transaction ID: 00317.C178393  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	OLTOL	250.00
Name of Employer Retired	Occupatio Retired	n	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			-4250.00

## SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 36 (check only one)    X
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Cong	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial)	gressional O	Onlinituee	
۱.	Lovett Peters  Mailing Address 10 Longwood Dr #10			Date of Receipt  0 2 1 2 2 0 1 0
	City Westwood	State MA	Zip Code 02090	Transaction ID: 00217.C178071  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Pioneer Instituté	Occupatio Executive		
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
 3.	Full Name (Last, First, Middle Initial) Josephine Pomeroy  Mailing Address 10 Longmeadow Dr.	1		Date of Receipt
	City	State	Zip Code	0 2 2 4 2 0 1 0 Transaction ID: 00317.C178130
	Westwood	MA	02090	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Information Requested	Occupatio Informati	n ion Requested	
	Receipt For:  Primary  General  Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
_ ;.	Full Name (Last, First, Middle Initial) Chris Rohan			Date of Receipt
	Mailing Address 86 Jacobs Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 00317.C178149
	Norwell  FEC ID number of contributing federal political committee.	MA C	02061	Amount of Each Receipt this Period 500.00
	Name of Employer Fidelity Investments	Occupatio VP Inves	n stment Communication	
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional)		<b>1</b>	2000.00

## SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 36 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  Massachusetts Republican State Co	d Statements may not be sold or used by any person the name and address of any political committee to engressional Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mark Russell  Mailing Address 15 Hobart Rd  City  Newton  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For:  Primary General	State Zip Code MA 02459  C  Occupation Information Requested Aggregate Year-to-Date	Date of Receipt  O 2
Full Name (Last, First, Middle Initial) Michael Savage  Mailing Address 100 Belvidere St Apt 7bc  City  Boston  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)	State Zip Code MA 02199  C  Occupation Retired Aggregate Year-to-Date   500.00	Date of Receipt  M M / D D / Y Y Y Y Y  O 2
Full Name (Last, First, Middle Initial) Steven Snider  Mailing Address 114 Shornecliffe Roa  City Newton  FEC ID number of contributing federal political committee.  Name of Employer Pyramis Global Advisors  Receipt For:  Primary General Other (specify)	State Zip Code MA 02458  C  Occupation Portfolio Manager  Aggregate Year-to-Date  10000.00	Date of Receipt  M M / D D / Y Y Y Y Y  O 2 2 2 1 0  Transaction ID: 00317.C178258  Amount of Each Receipt this Period  10000.00
SUBTOTAL of Receipts This Page (optional)	<u> </u>	10750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 36 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  Massachusetts Republican State (	and Statements may not be sold or used by any pers g the name and address of any political committee to Congressional Committee	
Full Name (Last, First, Middle Initial) Sinclair Weeks  Mailing Address 100 Newbury Ct.,  City Concord  FEC ID number of contributing federal political committee.  Name of Employer Retired  Receipt For: Primary General Other (specify)	Apt. 502  State Zip Code MA 01742  C  Occupation Retired  Aggregate Year-to-Date   1000.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) D. Bradford Wetherell  Mailing Address 47 Fresh Pond Ln.  City  Cambridge  FEC ID number of contributing federal political committee.  Name of Employer Romney for President  Receipt For:  Primary General  Other (specify)	State Zip Code MA 02138  C  Occupation Policy Advisor  Aggregate Year-to-Date   600.00	Date of Receipt    M   M   26   2010   Transaction ID: 00317.C178394   Amount of Each Receipt this Period   300.00
Full Name (Last, First, Middle Initial) Bipartisan Political Action Committee  Mailing Address The Bank of NY M One mellon Bank of City Pittsburgh  FEC ID number of contributing federal political committee.  Name of Employer Information Requested  Receipt For: Primary General Other (specify)		Date of Receipt    M M M
SUBTOTAL of Receipts This Page (option	nal)	6300.00
		72200.00

C.

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: DACE 14/20
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
TI LIMIZED DISBOTISEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congress	sional Committee		
Full Name (Last, First, Middle Initial)			Transaction ID: 00317.E11938
Tara Esfahanian			Date of Disbursement
Mailing Address 177 Upham St.			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Melrose	State Zip Code MA 02176		Amount of Each Disbursement this Period
Purpose of Disbursement Fundraising consulting fee for party rel			2500.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:	-		
Full Name (Last, First, Middle Initial) Guardian Guardian			Transaction ID: 00317.E11913 Date of Disbursement
Mailing Address Boston Group Office 1 Liberty Square			$\begin{bmatrix} 0 & 2 & M \\ 0 & 2 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & D \\ 0 & 1 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & 0 \\ 0 & 2 & 0 & 1 \\ 0 & 0 & 0 \end{bmatrix}$
City Boston	State Zip Code MA 02109		Amount of Each Disbursement this Period
Purpose of Disbursement Dental Insurance		•	129.93
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Lyndsay Jones			Transaction ID: 00317.E11921 Date of Disbursement
Mailing Address 22 Presidents Lane			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & J \end{smallmatrix} \end{bmatrix} \ \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & J & O \\ Y & Z & O & J & O \end{bmatrix} $
City Quincy	State Zip Code MA 02169		Amount of Each Disbursement this Period
Purpose of Disbursement reimbursement for cell phone			106.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	,	
State: District:	· · · ·		
SURTOTAL of Dishursements This Page (ontional)			2735.93

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER:	PAGE 15/36
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only		
TEIMEED BIODOTICEMENTO	Detailed Summary Page	X 21b	22 23	24 25 26
Any Information copied from such Reports and Stater	nents may not be sold or used by	27 27	28a 28b	28c 29 30b
or for commercial purposes, other than using the nam				
NAME OF COMMITTEE (In Full)				
Massachusetts Republican State Congres	sional Committee			
Full Name (Last, First, Middle Initial) Melissa Lucas			Transaction ID: Date of Disburser	00317.E11927 ment
Mailing Address 22 Slayton Road			02 03	2010
City Melrose	State Zip Code MA 02176		Amount of Each D	Disbursement this Period
Purpose of Disbursement fundraising consultin fee for party rela				2500.00
Candidate Name		Category/ Type		
Senate President	ement For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial) Jennifer Nassour			Transaction ID: Date of Disburser	
Mailing Address 49 Chelsea St., Unit C1-	307		02 03	2010
City Boston	State Zip Code MA 02129		Amount of Each D	Disbursement this Period
Purpose of Disbursement Reimbursement See below				756.97
Candidate Name		Category/ Type		
Senate President	ement For:    Primary   General     Other (specify)   \(\pi\)			
State: District:				
Full Name (Last, First, Middle Initial) Jennifer Nassour			Transaction ID: Date of Disburser	nent
Mailing Address 49 Chelsea St., Unit C1-	307		02 03	<sup>2</sup> 2010
City Boston	State Zip Code MA 02129		Amount of Each D	Disbursement this Period
Purpose of Disbursement	Г	•		982.00
Reimbursement See below Candidate Name		Category/ Type		
Senate President	ement For: Primary General Other (specify)			
State: District:				_
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>		4238.97

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SOUEDIN E B /EEO Farms 2V)			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check onli	NUMBER: PAGE 16 / 36
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b	22 23 24 25 26
Any Information copied from such Reports and Statem	ents may not be sold or used	by any person	28a 28b 28c 29 30b for the purpose of soliciting contributions
or for commercial purposes, other than using the name	e and address of any political	committee to so	licit contributions from such committee
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congress	sional Committee		
Full Name (Last, First, Middle Initial) American Airlines			Transaction ID: 00317.E11958 Date of Disbursement
Mailing Address P.O. Box 619612 VFW Airport			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 3 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Dallas	State Zip Code TX 75261		Amount of Each Disbursement this Period
Purpose of Disbursement	73201	•	982.00
J. Nassour reimbursement for airfare  Candidate Name		Category/	
Senate President	ment For: Primary General Other (specify)	Туре	[MEMO ITEM]
State: District: Full Name (Last, First, Middle Initial)			
Direct Mail Systems			Transaction ID: 00317.E11905 Date of Disbursement
Mailing Address 12450 Automobile Boule	vard		$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
	State Zip Code FL 33762		Amount of Each Disbursement this Period
Purpose of Disbursement direct mail-party related non FEA		· · ·	1848.00
Candidate Name		Category/ Type	
Senate President	ment For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Matt Walter			Transaction ID: 00317.E11964  Date of Disbursement
Mailing Address 315 State St.			02 0 10 1
	State Zip Code NY 12210		Amount of Each Disbursement this Period
Purpose of Disbursement Reimbursement		•	1090.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Туре	
State: District:	, , , , , , , , , , , , , , , , , , ,		
SUBTOTAL of Disbursements This Page (optional)			2938.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the nam			
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congres	sional Committee		
Full Name (Last, First, Middle Initial) McDermott Will & Emory			Transaction ID: 00318.E11966 Date of Disbursement
Mailing Address 600 13th Street NW			$\begin{bmatrix} 0 & 2 & M \end{bmatrix}$ $\begin{bmatrix} 0 & 2 & 5 \end{bmatrix}$ $\begin{bmatrix} 1 & 2 & 0 & 1 & 0 \end{bmatrix}$
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Period
Purpose of Disbursement Legal Counsel		•	25000.00
Candidate Name		Category/ Type	
Senate President	ement For:  Primary General  Other (specify)	71	
State: District:  Full Name (Last, First, Middle Initial)			
American Express			Transaction ID: 00319.E11967 Date of Disbursement
Mailing Address PO Box 1270			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & A \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & I & O \end{smallmatrix} \end{bmatrix}$
City Newark	State Zip Code NJ 07101		Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card: See Below		•	10322.62
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)	71	
State: District:			
Full Name (Last, First, Middle Initial) Airflight Ins Premium			Transaction ID: 00319.E11973 Date of Disbursement
Mailing Address PO Box 19020			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 2 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} D & D \\ 0 & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} $
City Green Bay	State Zip Code WI 54307		Amount of Each Disbursement this Period
Purpose of Disbursement	5.667	•	299.88
amex payment - insurance prem.  Candidate Name		Category/	
Office Sought: House Disburs	ement For:	Туре	[MEMO ITEM]
Senate President	Primary General Other (specify) ▼		
State: District:			

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 18/36										
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b										
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													
NAME OF COMMITTEE (In Full)													
Massachusetts Republican State Congress	ional Committee												
Full Name (Last, First, Middle Initial) Delta Airline			Transaction ID: 00319.E11972 Date of Disbursement										
Mailing Address web address only- www.c	lelta.com		02 7 04 7 2010										
•	State Zip Code MA 02114		Amount of Each Disbursement this Period										
Purpose of Disbursement amex payment - travel			6616.80										
Candidate Name		Category/ Type											
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		[MEMO ITEM]										
State: District:													
Full Name (Last, First, Middle Initial) Hilton Back Bay			Transaction ID: 00319.E11971 Date of Disbursement										
Mailing Address 40 Dalton St.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & 1 & O \end{smallmatrix} \end{bmatrix}$										
•	State Zip Code MA 02115		Amount of Each Disbursement this Period										
Purpose of Disbursement amex payment - hotel			3276.61										
Candidate Name		Category/ Type											
Office Sought:  Senate President State:  Disburse	ment For: Primary General Other (specify) ▼		[MEMO ITEM]										
Full Name (Last, First, Middle Initial) Blue Cross Blue Shield of Massachusetts			Transaction ID: 00317.E11898 Date of Disbursement										
Mailing Address Landmark Center 401 Park Drive			$\begin{bmatrix}\begin{smallmatrix}M&2&M\\0&2&\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&1&D\\1&7\end{smallmatrix}]/\begin{bmatrix}\begin{smallmatrix}Y&&Y&0&Y&0\\&2&0&1&0\end{smallmatrix}$										
City	State Zip Code MA 02215		Amount of Each Disbursement this Period										
Purpose of Disbursement Health Insurance			468.20										
Candidate Name		Category/ Type											
Office Sought:  Senate President State:  Disburse	ment For: Primary General Other (specify) ▼												
			468.20										
SUBTOTAL of Disbursements This Page (optional) .  TOTAL This Period (last page this line number only)													

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CHEDULE B (FEC Form 3X)	Use sepa			NE NUMBER: PAGE 19/36						PAGE 19/36							
EMIZED DISBURSEMENTS	for each o	category of the	I —		nly c	·       —	م ٦	г	_	0.4	_	٦ ٥٠		<b>1</b> 26			
	Detailed S	Summary Page	X	21b 27	nly one)  22		] 26   30b										
Information copied from such Reports and Stater													s				
or commercial purposes, other than using the name	e and addres	ss of any political	commit	tee to	solic	it contribi	utions	fror	n s	uch c	omi	mittee					
NAME OF COMMITTEE (In Full)																	
Massachusetts Republican State Congres	sional Com	nmittee															
Full Name (Last, First, Middle Initial) Boston Marriott Newton											.E1	1922					
Mailing Address 2345 Commonwealth Av	/e.					0 2	/ 0	1	<sup>D</sup> 7	/ Y	Ź	2 0 1	0 <sup>Y</sup>				
City	State	Zip Code				Amount	of Eac	h [	Disk	urse	mer	nt this	Perio	od			
Newton										-							
Purpose of Disbursement catering and room rental for state commi	ring and room rental for state commi										. 2	250.00	J				
Candidate Name			Cateo Typ	•													
Office Sought: House Senate President State: District:	ement For: Primary Other (spe	General cify) ▼															
Full Name (Last, First, Middle Initial) Bowditch & Dewey											.E1	1899					
						M M				Ι <b>Ι</b> / Υ	, , ,	ΥΥ	Υ				
Mailing Address 311 Main St. PO Box 15156						0 2	Ľ	0	3	L	2	201	0				
City Worcester	State MA	Zip Code 01615				Amount	of Eac	h [	Disk	urse	mer	nt this	Perio	od			
Purpose of Disbursement General Counsel and compliance								0			17	700.00	)	Ш			
Candidate Name			Cateo														
Senate President	ement For: Primary Other (spe	General cify) ▼															
State: District: Full Name (Last, First, Middle Initial)					+	_			_		_						
Byte Bulb						Date of	Disbur	ser	mer								
Mailing Address The Trimount Company, 75 Meadowbrook RD.	, Inc.					0 2		0 ;	3	/ L	2	2 0 1 i	0 1				
City Hanover	State MA	Zip Code 02339				Amount	of Eac	h [	Disk	urse	-			od			
Purpose of Disbursement party related website development			· ·					-	_		2	210.00	)	Ш			
Candidate Name			Cateo														
Office Sought: House Disburs: Senate President State: District:	ement For: Primary Other (spe	General cify) ▼	7.5														
Otato. Digitiot.						_		_	_		_			_			
JBTOTAL of Disbursements This Page (optional)								<u>.</u>	-	-	21	60.00	)	님			
<b>OTAL</b> This Period (last page this line number only						and the second											

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SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 20/36
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	
TI LIMIZED DISDOTISEMENTS	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30k
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name	nents may not be sold or used e and address of any political	by any person for committee to sol	or the purpose of soliciting contributions icit contributions from such committee
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congres	sional Committee		
Full Name (Last, First, Middle Initial)			Transaction ID: 00317.E11963
Crowne Plaza Newton			Date of Disbursement
Mailing Address 320 Washington St.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & Z \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ O & A \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & I & O \end{smallmatrix} \end{bmatrix} $
City Newton	State Zip Code MA 02458		Amount of Each Disbursement this Period
Purpose of Disbursement event fee		-	1562.80
Candidate Name		Category/ Type	
Office Sought: House Disbursi Senate President	ement For:  Primary General  Other (specify)	.,,,,,	
State: District:			
Full Name (Last, First, Middle Initial) Diaz Communications			<b>Transaction ID:</b> 00317.E11960 Date of Disbursement
Mailing Address 9911 Oleander Ave.			$\begin{bmatrix} \begin{smallmatrix} M & M \\ D & Z \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & D \\ D & Z \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Y \\ Z & D & I & O \end{smallmatrix} \end{bmatrix} $
City Vienna	State Zip Code VA 22181		Amount of Each Disbursement this Period
Purpose of Disbursement Consulting		* *	924.37
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For:  Primary  Other (specify)	71.	
State: District:			
Full Name (Last, First, Middle Initial) Diaz Communications			<b>Transaction ID:</b> 00317.E11961 Date of Disbursement
Mailing Address 9911 Oleander Ave.			$\begin{bmatrix}\begin{smallmatrix}M&2&M\\0&2&M\end{smallmatrix}\end{bmatrix}^\top \begin{bmatrix}\begin{smallmatrix}D&0&3\\0&3\end{smallmatrix}\end{bmatrix}^\top \begin{bmatrix}\begin{smallmatrix}Y&Y&Y&Y&Y\\2&0&1&0\end{smallmatrix}\end{bmatrix}^Y$
City Vienna	State Zip Code VA 22181		Amount of Each Disbursement this Period
Purpose of Disbursement Consulting			2500.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For:  Primary  Other (specify)		
State: District:	- · · · · · · · · · · · · · · · · · · ·		
SURTOTAL of Dishursements This Page (ontional)			4987.17

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SCHEDULE B (FEC Form 3X)	Harris I I I I I I	FOR LINE	NE NUMBER: PAGE 21/36											
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only												
TI LIVILLE BIODOTTOLIVILITY	Detailed Summary Page	X 21b	22 23	24 25 26										
Any Information copied from such Reports and Stater	nanta may not be cold or used by	27	28a 28b	28c 29 30b										
or for commercial purposes, other than using the nam														
NAME OF COMMITTEE (In Full)														
Massachusetts Republican State Congres	sional Committee													
Full Name (Last, First, Middle Initial) Direct Mail Systems			Transaction ID: Date of Disburser											
Mailing Address 12450 Automobile Boule	evard		02 4 7 7 7 2 0 1 0											
City Clearwater	State Zip Code FL 33762		Amount of Each Disbursement this Period											
Purpose of Disbursement direct mail-party related non FEA														
Candidate Name														
Senate President	ice Sought: Disbursement For: Senate Primary General													
State: District:														
Full Name (Last, First, Middle Initial) Hampshire House			Transaction ID: Date of Disburser	nent										
Mailing Address 84 Beacon St.			02 17	7 2010										
City Boston	State Zip Code MA 02108		Amount of Each D	Disbursement this Period										
Purpose of Disbursement Catering for party related fundraising e		•		886.36										
Candidate Name		Category/ Type												
Senate President	ement For: Primary General Other (specify)													
State: District: Full Name (Last, First, Middle Initial)														
Kauppi Communications			Transaction ID: Date of Disburser	nent										
Mailing Address 27 Townly Road			02 03	B										
City Watertown	State Zip Code MA 02472		Amount of Each D	Disbursement this Period										
Purpose of Disbursement	• •		3000.00											
communications consulting fee party rela Candidate Name		Category/												
Senate President	ement For:  Primary  General  Other (specify)													
State: District:														
SUBTOTAL of Disbursements This Page (optional)		<u></u>		10021.36										

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		INE NUMBER: PAGE 22/3										
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check onl		23 Г	7 24	□ :	25	□ 26					
	Detailed Guillinary Fage	27		28b	28c	$\vdash$	29	30b					
Any Information copied from such Reports and State or for commercial purposes, other than using the nar													
NAME OF COMMITTEE (In Full)	· · · · · · · · · · · · · · · · · · ·												
Massachusetts Republican State Congres	ssional Committee												
Full Name (Last, First, Middle Initial) Keswick Consulting			Transaction ID: 00317.E11923 Date of Disbursement										
Mailing Address 231 Victory Road			02										
City Quincy	State Zip Code MA 02171		Amount of Each Disbursement this Period										
Purpose of Disbursement Political consulting Fee- party realated	•				300	0.00							
Candidate Name		Category/ Type											
Senate President	ement For: Primary General Other (specify)												
State: District:													
Full Name (Last, First, Middle Initial) Keswick Consulting			Transactio Date of Dis	burser	nent								
Mailing Address 231 Victory Road			02	<sup>D</sup> 2 !	5 / Y	ž	) 1 0	Y					
City Quincy	State Zip Code MA 02171		Amount of I	Each [	Disburse	-		eriod					
Purpose of Disbursement Political consulting fee-party related n						300	0.00						
Candidate Name		Category/ Type											
Office Sought:  Senate  President  State:  Disburs  President	ement For: Primary General Other (specify)												
Full Name (Last, First, Middle Initial)			T	ID	00017		04.0						
Konica Minolta Business Systems			Transactio Date of Dis	burser	nent			V					
Mailing Address P.O. Box 7247-0322			02 4	0 3	3 /	2 (	) 1 0						
City Philadelphia	State Zip Code PA 19170		Amount of I	Each [	Disburse	-		eriod					
Purpose of Disbursement copier lease					,//:	5.23							
Candidate Name		Category/ Type											
Senate President	ement For: Primary General Other (specify)												
State: District:													
SUBTOTAL of Disbursements This Page (optional)		<u></u>				677	5.23						

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		OR LIN	E NUMBE	ER:	PA	36							
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1 —	21b 27	22 28a	23 28b	24 28c	25 29	26 30b						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			y person	for the p	urpose of :	soliciting c	ontribution	ns						
NAME OF COMMITTEE (In Full)														
Massachusetts Republican State Congress	sional Committee													
Full Name (Last, First, Middle Initial) Konica Minolta Business Systems				Transaction ID: 00317.E11919 Date of Disbursement										
Mailing Address P.O. Box 7247-0322				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$										
City Philadelphia	State Zip Code PA 19170			Amount of Each Disbursement this Period										
Purpose of Disbursement copier lease				L.			767.9	1						
Candidate Name			egory/ ype											
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)													
Full Name (Last, First, Middle Initial)				Tuon	oostion IF	. 00017	7 E11000							
Lexis-Nexis				Transaction ID: 00317.E11920 Date of Disbursement										
Mailing Address PO Box 7247-7090				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$										
City Philadelphia	State Zip Code PA 19170			Amount of Each Disbursement this Period										
Purpose of Disbursement				1750.00										
Candidate Name			egory/ ype											
Senate President	ement For: Primary General Other (specify)													
State: District:														
Full Name (Last, First, Middle Initial) Lindsay Shanholt Web Design					of Disburs									
Mailing Address 286 Beacon St. Apt. 9				0 2	M / D	17	201	0 1						
City Boston	State Zip Code MA 02116			Amoi	unt of Eac	h Disburse								
Purpose of Disbursement Website design				L.			425.0	0						
Candidate Name			egory/ /pe											
Senate President	ement For: Primary General Other (specify)	_												
State: District:														
SUBTOTAL of Disbursements This Page (optional)			. •				2942.9	1						

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SCHEDULE B (FEC Form 3X)		e schedule(s)			OR LIN		UMBE	R:	24 / 3	36						
ITEMIZED DISBURSEMENTS	for each cate Detailed Sur			X		П	22 28a	П	23 28b	F	24 28c	F	25 29	П	26 30b	
Any Information copied from such Reports and Statem or for commercial purposes, other than using the nam							the pu				citing c			<u>                                     </u>		
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congress	sional Comm	ittee														
Full Name (Last, First, Middle Initial) Ox-Eye Properties  Mailing Address									sburs	em 1 7			010	Perio	d	
State: District:  Full Name (Last, First, Middle Initial) Ox-Eye Properties	Other (specify	, <b>√</b>					Date o		sburs				1931 0 1 0	Y		
Mailing Address c/o Massey & Co. 85 Merrimac Street	State Z	ip Code						nt of							<del></del>	
Boston		2114				Amount of Each Disbursement this Period 4688.70										
Purpose of Disbursement Rent & Utilites Candidate Name				atec Typ	gory/			•				40	00.70			
Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (specify	General														
Full Name (Last, First, Middle Initial) Paychex/InterPay							Trans				00317 nent	'.E1	1948			
Mailing Address PO Box 8295							0 <sup>M</sup> 2	М	D (	) 4	) / [	Ž	0 i 0	) <sup>Y</sup>		
Boston		ip Code 12266					Amou	nt o	Each	ı D	isburse	-		-	d	
Purpose of Disbursement payroll fee				*	•		L.	-	-			-	81.16	)		
Candidate Name				atec Typ	gory/ pe											
Office Sought: House Disburse Senate President	ement For: Primary Other (specify	General														
State: District:															_	
SUBTOTAL of Disbursements This Page (optional)					<u> </u>							51	17.01			

В.

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			INE NUMBER: PAGE 25							36						
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		_	2	22 28a	23 28b	, [	24 28c		25 29	26 30b						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			y person	n for th	ie pu	rpose of	so	liciting c		outions							
NAME OF COMMITTEE (In Full)																	
Massachusetts Republican State Congress	sional Committee																
Full Name (Last, First, Middle Initial) Paychex/InterPay				Transaction ID: 00317.E11949 Date of Disbursement													
Mailing Address PO Box 8295				02 18 7 2010													
,	State Zip Code			Amount of Each Disbursement this Period													
Boston	MA 02266			_ [			-			77.71							
Purpose of Disbursement payroll fee							-	-		77.7							
Candidate Name			egory/ /pe														
Senate President	ment For: Primary General Other (specify)																
State: District:																	
Full Name (Last, First, Middle Initial) Paychex/InterPay						<b>action I</b> of Disbu		00317 ment	7.E1	1950							
Mailing Address PO Box 8295					0 2	М / С	0	<sup>D</sup> / 1	Ý 2	ž 0 1 0 °							
,	State Zip Code MA 02266			A	mou	nt of Ea	ch	Disburse	emen	t this I	Period						
Purpose of Disbursement payroll tax		•		7 L	2280.86												
Candidate Name			egory/ /pe														
Senate President	ment For: Primary General Other (specify)																
State: District:																	
Full Name (Last, First, Middle Initial) Paychex/InterPay				1		action I of Disbu		00317 ment	7.E1	1951							
Mailing Address PO Box 8295					0 2	М / С	1	8 /	Ý Ž	0 1 (	) \						
	State Zip Code MA 02266			A	mou	nt of Ea	ch	Disburse	emen	t this I	Period						
Purpose of Disbursement payroll tax									22	60.87							
Candidate Name			egory/ /pe														
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)																
State: District:																	
SUBTOTAL of Disbursements This Page (optional)									46	19.44							

C.

SCHEDULE B (FEC Form 3X)		arate schedule(s)			OR LIN			R:		PA	PAGE 26/36									
ITEMIZED DISBURSEMENTS		category of the Summary Page		X	-		22 28a		23 28b	24 28c		25 29	26 30b							
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name													5							
NAME OF COMMITTEE (In Full)	ie and addre	ss of any political	COIIII		ilee io s	OIIC	it conti	ibuti	0115 110	JIII SUCII (	,01111	iiillee								
Massachusetts Republican State Congres	sional Con	nmittee																		
Full Name (Last, First, Middle Initial) Poland Spring						Transaction ID: 00317.E11932 Date of Disbursement														
Mailing Address Processing Center PO Box 52271						0 2 M / D D / Y 2 0 1 0 Y														
City Phoenix	State Zip Code AZ 85072										Amount of Each Disbursement this Period									
Purpose of Disbursement Bottled water									-			96.66								
Candidate Name					gory/ pe															
Senate President	ement For: Primary Other (spe	General ecify) ▼																		
State: District: Full Name (Last, First, Middle Initial)										0004		1000								
SCM Associates							Date of	of Di	sburse		.E1	1933								
Mailing Address Steve Meyers 1283 Main Street						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$														
City Dublin	State NH	Zip Code 03444					Amou	nt of	f Each	Disburse	men	t this f	Period							
Purpose of Disbursement Direct Mail								_			55	13.96								
Candidate Name					gory/ pe															
Office Sought: House Disburs Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼																		
Full Name (Last, First, Middle Initial)							Trono	ooti	on ID:	00317		1024								
SCR & Associates, LLC							Date o	of Di	sburse	ement										
Mailing Address 4 Leblanc Dr							0 <sup>M</sup> 2	M	1	7 /	ž	0 Ĭ (	)							
City Danvers	State MA	Zip Code 01923					Amou	nt of	f Each	Disburse	men	t this f	Period							
Purpose of Disbursement Fundraising Consulting Fee- party relate								_			60	00.00	)							
Candidate Name					gory/ pe															
Office Sought: House Disburs Senate President	ement For: Primary Other (spe	General ♥																		
State: District:																				
SUBTOTAL of Disbursements This Page (optional)											16	10.62								

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s			INE NUMBER: PAG only one)							36									
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	I	21b 27		22 28a	23		24 28	, F	25 29	E	26 30b								
Any Information copied from such Reports and State or for commercial purposes, other than using the na																				
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congre	ssional Committee																			
Full Name (Last, First, Middle Initial) Sprint/Nextel  Mailing Address PO Box 17990				Transaction ID: 00317.E11935 Date of Disbursement  O 2 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y																
City	State Zip Code										Amount of Each Disbursement this Period									
Denver Purpose of Disbursement cell phone	CO 80217		-	- [					1	270.1	4									
Candidate Name			egory/ ype																	
Office Sought:    House   Disbur     Senate   President     State: District:	sement For:  Primary General  Other (specify) ▼		· ·																	
Full Name (Last, First, Middle Initial) Staples, Inc.					Date o	f Disb	urse	: 0031 ement												
Mailing Address Staples Credit Plan Dept. 80 - 0088936796					0 2		<sup>D</sup> 1	7 /	<u> </u>	ž 0 Ť	0									
City Des Moines	State Zip Code IA 50368			<i>A</i>	Amour	nt of E	ach	Disbur				od								
Purpose of Disbursement Office supplies Candidate Name									220.18											
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Office Sought: House Disbur Senate President State: District:	sement For: Primary General Other (specify)																			
Full Name (Last, First, Middle Initial)				- 1				: 0031	7.E	11937	7									
Staples, Inc.  Mailing Address Staples Credit Plan					Date of $0^{M}$ 2	_	urse	ement	Y	ž 0 Ť	0 <sup>Y</sup>									
Dept. 80 - 0088936796	State Zip Code				Amour	nt of F	ach	Disburs	seme	nt this	Perio									
Des Moines	IA 50368	1				0		2.000		131.7										
Purpose of Disbursement Office supplies				'		-				101.7	,									
Candidate Name			egory/ ype																	
Office Sought: House Disbur Senate President	sement For: Primary General Other (specify)																			
State: District:																				
SUBTOTAL of Disbursements This Page (optional	)		. •						6	22.0	8									

В.

Office Sought:

State:

House

Senate

District:

President

Disbursement For:

Primary

Other (specify)

## **SCHEDULE B (FEC Form 3X)**

FOR LINE NUMBER: PAGE 28/36 Use separate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee Full Name (Last, First, Middle Initial) Transaction ID: 00317.E11939 Verizon Date of Disbursement 03 0 2 2010 Mailing Address P.O. Box 1 City State Zip Code Amount of Each Disbursement this Period MA 01654 Worcester 792.12 Purpose of Disbursement Office phone Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: 00317.E11940 Verizon Date of Disbursement 2010 Mailing Address P.O. Box 1 City State Zip Code Amount of Each Disbursement this Period Worcester MA 01654 643.63 Purpose of Disbursement Office phone Candidate Name Category/ Type

General

SUBTOTAL of Disbursements This Page (optional)	•	1435.75
TOTAL This Period (last page this line number only)	•	95995.29

	OLE B (FEC FOIII 3X)		rate schedule(s)		NE NUMBER: only one)		PAGE 29	30
	ED DISBURSEMENTS	Detailed S	ategory of the Summary Page	21b 27	22 28a	28b :	24 25 28c 29	X
NAME (	tion copied from such Reports and S ercial purposes, other than using the DF COMMITTEE (In Full) chusetts Republican State Cong	name and addres	s of any political					
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Nick C	ne (Last, First, Middle Initial) onnors  Address 74 Green Street					Disbursemen	317.E11946 t 201	
	74 Green etreet				-		-	
City Stoneh	am	State MA	Zip Code 02180		Amount	of Each Disb	ursement this	Perio
payroll	of Disbursement			•	]		1941.4	2
Candida	te Name			egory/ ype				
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	ne (Last, First, Middle Initial) onnors					ction ID: 00 Disbursemen	317.E11947 t	7
Mailing	Address 74 Green Street				02	<sup>1</sup> 18	<sup>Y</sup> 201	0 <sup>Y</sup>
City Stoneh	am	State MA	Zip Code 02180		Amount	of Each Disb	ursement this	Perio
Purpose payroll	of Disbursement			-	T L.		1941.4	2
	te Name			egory/ ype				
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State: Full Nar	District: ne (Last, First, Middle Initial)				Transac	etion ID: 00	317.E11952	· · · ·
Tarah	Donoghue				Date of	Disbursemen	t	
Mailing	Address 3 Main Street				02	0 4	<sup>y</sup> <sup>y</sup> 201	0 '
City Dover		State MA	Zip Code 02030		Amount	of Each Disb	ursement this	
Purpose payroll	of Disbursement				1		1584.4	0
	te Name			egory/ ype				
Office S	ought: House Dist Senate President	oursement For: Primary Other (spec	General					
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SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s	(check onl	E NUMBER: PAGE 30 / 36
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 2 28a 28b 28c 29 X
Any Information copied from such Reports and Stator for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congre	ssional Committee		
Full Name (Last, First, Middle Initial)			Transaction ID: 00317.E11953
Tarah Donoghue			Date of Disbursement
Mailing Address 3 Main Street			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Dover	State Zip Code MA 02030		Amount of Each Disbursement this Perio
Purpose of Disbursement	IVIA 02030		1584.42
payroll payroll			
Candidate Name		Category/ Type	
Senate President	sement For:  Primary General  Other (specify) ▼		
State: District: Full Name (Last, First, Middle Initial)			
Kaitlyn Greeley			Transaction ID: 00317.E11942 Date of Disbursement
Mailing Address 34 Fresno St.			$\begin{bmatrix} \begin{smallmatrix} M & Z & M \\ D & Z & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & D \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & D & I & D \end{smallmatrix} \end{bmatrix}$
City Boston	State Zip Code MA 02131		Amount of Each Disbursement this Perio
Purpose of Disbursement payroll	02101		685.14
Candidate Name		Category/ Type	
Office Sought: House Senate President State: District:	sement For: Primary General Other (specify)	Турс	
Full Name (Last, First, Middle Initial) Kaitlyn Greeley			Transaction ID: 00317.E11943 Date of Disbursement
Mailing Address 34 Fresno St.			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 1 & B \\ 1 & 8 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & 2 & 0 & 1 & 0 \\ & 2 & 0 & 1 & 0 \end{bmatrix}$
City Boston	State Zip Code MA 02131		Amount of Each Disbursement this Perio
Purpose of Disbursement payroll			685.14
Candidate Name		Category/ Type	
Senate President	sement For: Primary General Other (specify)		
State: District:			
	l)		2954.70

Temizer Disbursement State:    City   Category   Categ	SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s		NUMBER: PAGE 31/36
NAME OF COMMITTEE (In Full)  NAME OF COMMITTEE (In Full)  NAME OF COMMITTEE (In Full)  Name (Last, First, Middle Initial)  Kirsten Hughes  Malling Address 72 Davis Street  City State Zip Code MA 02170  Purpose of Disbursement payroll  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  City State Zip Code Other (specify) ▼  Transaction ID: 00317.E11944  Date of Disbursement this Peric Category'  Type  Transaction ID: 00317.E11945  Date of Disbursement this Peric Category'  Type  Transaction ID: 00317.E11945  Date of Disbursement this Peric Category'  Type  Transaction ID: 00317.E11945  Date of Disbursement this Peric Category'  Type  Transaction ID: 00317.E11945  Date of Disbursement this Peric Category'  Type  Office Sought: House Senate Primary General Other (specify) ▼  Transaction ID: 00317.E11945  Date of Disbursement this Peric Category'  Type  Office Sought: House Senate Primary General Other (specify) ▼  Transaction ID: 00317.E11945  Date of Disbursement this Peric Category'  Type  Office Sought: House President State: District:  Full Name (Last, First, Middle Initial)  Brett Kasper  Malling Address 43 Eastern Ave. Apt. 3  City State Zip Code MA 01902  Purpose of Disbursement payroll  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Transaction ID: 00317.E11900  Date of Disbursement this Peric Date of Date of Disbursement this Peric Date of Date of D		Detailed Summary Page	21b 27	22 23 24 25 2 28a 28b 28c 29 X
Massachusetts Republican State Congressional Committee	r for commercial purposes, other than using the n			
Mailing Address   72 Davis Street   State   Zip Code   Quincy   State   Zip Code   Quincy   MA   O2170   O2	` '	essional Committee		
City Quincy State Zip Code MA 02170  Purpose of Disbursement payroll Category/ Type  Office Sought: House President District:  Full Name (Last, First, Middle Initial) Kirsten Hughes  Mailing Address 72 Davis Street  City Quincy MA 02170  Purpose of Disbursement payroll Candidate Name  Office Sought: House Primary General Disbursement For: Senate Primary General District:  City State Zip Code MA 02170  Purpose of Disbursement payroll Candidate Name  Office Sought: House Disbursement For: General Disbursement For: Senate Primary General Disbursement For: General Disbursement District:  Full Name (Last, First, Middle Initial) Brett Kasper  Mailing Address 43 Eastern Ave. Apt. 3  City State Zip Code MA 01902  Purpose of Disbursement President Disbursement For: General Disbursement For: Senate Primary General Disbursement For: Formary General Disbursement For: Senate Primary General Disbursement For: Formary General Disbursement For:	,			Date of Disbursement
Quincy     MA     02170       Purpose of Disbursement payroll candidate Name     Disbursement For:         Senate Primary General Other (specify) ▼       City     State Zip Code Quincy     MA     02170       Category/ Type     Amount of Each Disbursement this Peric Apyroll       Category/ Type     Transaction ID: 00317.E11945 Date of Disbursement       City     State Zip Code Quincy     MA     02170       Purpose of Disbursement payroll     Disbursement For:         Senate President District:     Amount of Each Disbursement this Peric Date of Disbursement       Full Name (Last, First, Middle Initial)     Disbursement For:         Senate District:     Primary General Date of Disbursement       Full Name (Last, First, Middle Initial)     Transaction ID: 00317.E11900 Date of Disbursement       Mailing Address     43 Eastern Ave. Apt. 3       City Lynn     State Zip Code MA 01902       Purpose of Disbursement payroll     Category/ Type       Office Sought:     House MA 01902       Purpose of Disbursement payroll     Category/ Type       Office Sought:     Disbursement For:         Senate Primary General Prima	Mailing Address 72 Davis Street			0 2 0 1 0
Cardidate Name  Office Sought: House Senate Prisadent State: District:  Full Name (Last, First, Middle Initial) Kirsten Hughes  Mailing Address 72 Davis Street  City Senate President MA 02170  Office Sought: House Senate Prisadent State: Disbursement For: Senate President State: District:  Full Name (Last, First, Middle Initial) Kirsten Hughes  Transaction ID: 00317.E11945 Date of Disbursement this Period Category' Type  Office Sought: House Prisadent Other (specify) ▼  Office Sought: House Prisadent Other (specify) ▼  Transaction ID: 00317.E11945 Date of Disbursement this Period Category' Type  Office Sought: House Prisadent Other (specify) ▼  Transaction ID: 00317.E1190 Date of Disbursement this Period Date of Disbursement  Transaction ID: 00317.E1190 Date of Disbursement To: Other (specify) ▼  Transaction ID: 00317.E1190 Date of Disbursement Date of Disbursement  Transaction ID: 00317.E1190 Date of Disbursement  Transaction ID:	Quincy			Amount of Each Disbursement this Perio
Office Sought: House Senate Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Kirsten Hughes  Mailing Address 72 Davis Street  City State Zip Code Quincy MA 02170  Purpose of Disbursement payroll  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  City State Zip Code MA 02170  Amount of Each Disbursement this Peric Senate Primary General Other (specify) ▼  Transaction ID: 00317.E11945 Date of Disbursement this Peric Category/ Type  Transaction ID: 00317.E11900 Date of Disbursement for: Senate Primary General Other (specify) ▼  Transaction ID: 00317.E11900 Date of Disbursement this Peric Category/ Type  Transaction ID: 00317.E11900 Date of Disbursement for: Senate Primary General Other (specify) ▼  City State Zip Code Lynn MA 01902  Purpose of Disbursement payroll  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Senate Primary General Other (specify) ▼	payroll		Category/	1092.57
Full Name (Last, First, Middle Initial) Kirsten Hughes  Mailing Address 72 Davis Street  City Quincy Purpose of Disbursement payroll Candidate Name  District:  Full Name (Last, First, Middle Initial) Brett Kasper  Mailing Address 43 Eastern Ave. Apt. 3  City Lynn Purpose of Disbursement payroll Candidate Name  District:  Full Name (Last, First, Middle Initial) Brett Kasper  Mailing Address 43 Eastern Ave. Apt. 3  City Lynn Purpose of Disbursement Mailing Address  Ganeral District:  Category/ Type  District:  City Lynn Mailing Address  Category/ Type  Disbursement District:  Category/ Type  Amount of Each Disbursement Initial District:  District:  Amount of Each Disbursement Initial District:  Category/ Date of Disbursement  District:  Category/ Type  Office Sought:  House Senate Primary General Other (specify)  Gandrate  Category/ Type  Office Sought:  Office Sought:  Disbursement For: Senate Primary General Other (specify)  Category/ Type  Office Sought:  Office Sought: Office So	Senate President	Primary General		
City State Zip Code MA 02170  Purpose of Disbursement payroll  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  City State Zip Code MA 01902  City State Zip Code Purpose of Disbursement For: State City State Disbursement For: State Disburs	Full Name (Last, First, Middle Initial)			Date of Disbursement
Quincy MA 02170   Purpose of Disbursement payroll Category/ Type   Office Sought: House Senate Primary General President Other (specify) ▼   State: District:    Transaction ID: 00317.E11900 Date of Disbursement  Other (specify) ▼  Transaction ID: 00317.E11900 Date of Disbursement  Other (specify) ▼  Transaction ID: 00317.E11900 Date of Disbursement  Other (specify) ▼  Transaction ID: 00317.E11900 Date of Disbursement  Other (specify) ▼  Other (specify) There (sp	Mailing Address 72 Davis Street			02 18 2010
Category/ Type  Office Sought: House Senate Primary General  State: District:  Full Name (Last, First, Middle Initial) Brett Kasper  Mailing Address 43 Eastern Ave. Apt. 3  City State Zip Code Lynn MA 01902  Purpose of Disbursement payroll  Candidate Name  Office Sought: House Senate Primary General  Office Sought: House Disbursement For:  Senate Primary General  Office Sought: Primary General  Office Sought: Primary General  Office Sought: Primary General  Office Sought: Primary General  Other (specify) ▼				
Office Sought: House Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Brett Kasper  Mailing Address 43 Eastern Ave. Apt. 3  City State Zip Code Lynn MA 01902  Purpose of Disbursement payroll  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: House Senate Primary General Other (specify) ▼  Office Sought: Primary General Other (specify) ▼	payroll			1092.58
Senate Primary General Other (specify) ▼  State: District:  Full Name (Last, First, Middle Initial) Brett Kasper  Mailing Address 43 Eastern Ave. Apt. 3  City State Zip Code Lynn MA 01902  Purpose of Disbursement payroll  Candidate Name  Office Sought: House Senate Primary General Other (specify) ▼  Other (specify) ▼  Transaction ID: 00317.E11900 Date of Disbursement  Date of Disbursement  Other (specify) ▼  Amount of Each Disbursement this Period Senate Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial) Brett Kasper  Mailing Address 43 Eastern Ave. Apt. 3  City State Zip Code Lynn MA 01902  Purpose of Disbursement payroll Candidate Name  Office Sought: House Senate President President  Transaction ID: 00317.E11900 Date of Disbursement  O 2 M / O 4 / Y 2 0 1 0 Y  Amount of Each Disbursement this Period  52.47	Senate President	Primary General		
City State Zip Code Lynn MA 01902  Purpose of Disbursement payroll  Candidate Name  Category/ Type  Office Sought: House Senate Primary General President Other (specify)   City State Zip Code MA 01902  Amount of Each Disbursement this Period Senate Primary General Primary General Other (specify)	Full Name (Last, First, Middle Initial)			Date of Disbursement
Lynn MA 01902  Purpose of Disbursement payroll  Candidate Name  Category/ Type  Office Sought: House Senate Primary General Other (specify) ▼	Mailing Address 43 Eastern Ave. Apt. 3	3		$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 2 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
payroll  Candidate Name  Category/ Type  Office Sought:  Benate Primary President  Disbursement For: Primary General Other (specify)  Type				
Office Sought:    House	payroll			52.47
Senate Primary General President Other (specify) ▼				
State: District:		Primary General		
		Other (specify)	l	

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	CHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER:	PAGE 32/36				
ITEMIZED DISBURSEMENTS		for each category of the	21b	7 22	□ 24 □ 2	25 🗖 26			
		Detailed Summary Page	27	28a 28b	$\square$ $\square$	29 X 30b			
	y Information copied from such Reports and St for commercial purposes, other than using the								
$\overline{\ }$	NAME OF COMMITTEE (In Full)								
/	Massachusetts Republican State Cong	essional Committee							
	Full Name (Last, First, Middle Initial)			Transaction ID	: 00317.E119	901			
	Brett Kasper			Date of Disburs	ement				
	Mailing Address 43 Eastern Ave. Apt.	3		02 1	18 <sup>'</sup> 20	10			
	City	State Zip Code		Amount of Each	n Disbursement t	his Period			
	Lynn	MA 01902							
	Purpose of Disbursement payroll				6	9.96			
	Candidate Name		Category/ Type						
	Office Sought: House Disb	rsement For:							
	Senate	Primary General							
	President	Other (specify)							
	State: District:								

SUBTOTAL of Disbursements This Page (optional)	<u> </u>	69.96
TOTAL This Period (last page this line number only)	<b></b>	10729.52

## SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

(Use separate schedule(s) for each

PAGE 33 / 36 FOR (chec

R LINE NUMBER:		
ck only one)		9
	Χ	10

excluding Loans		numbered line) (Sheek Grilly Grief)
NAME OF COMMITTEE (In Full)  Massachusetts Republican State Congression	nal Committee	
A. Full Name (Last, First, Middle Initial) of Debtor FLS Connect	Nature of Debt (Purpose):	
Mailing Address 7300 Hudson Blvd. Ste		
City State Saint Paul MN	ZIP Code 55128	
Outstanding Balance Beginning This Period		Transaction ID: LS91217.E1176
3910.20		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Perio
0.00	0.00	3910.20
B. Full Name (Last, First, Middle Initial) of Debtor Lexis-Nexis	or Creditor	Nature of Debt (Purpose):
Mailing Address PO Box 7247-7090		
City State Philadelphia PA	ZIP Code 19170	
Outstanding Balance Beginning This Period		Transaction ID: LS90513.E1127
250.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	250.00
C. Full Name (Last, First, Middle Initial) of Debtor Lexis-Nexis	or Creditor	Nature of Debt (Purpose):
Mailing Address PO Box 7247-7090		
City State Philadelphia PA	ZIP Code 19170	
Outstanding Balance Beginning This Period		Transaction ID: LS90513.E1127
250.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	250.00
SUBTOTALS This Period This Page (optional)		<b>4410.20</b>
2) TOTALS This Period (last page this line number of	only)	<b>&gt;</b>
3) TOTAL OUTSTANDING LOANS from Schedu	ıle C (last page only)	<b>&gt;</b>
4) ADD 2) and 3) and carry forward to appropriate	ine of Summary Page (last page only)	<b>&gt;</b>

## PAGE 34 / 36 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each numbered line) (check only one) 9 X 10 **Excluding Loans** NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Lexis-Nexis Mailing Address PO Box 7247-7090 ZIP Code City State Philadelphia PA 19170 Outstanding Balance Beginning This Period Transaction ID: LS90513.E11277 1250.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1250.00 0.00 0.00 1250.00 1) SUBTOTALS This Period This Page (optional)..... 5660.20 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

5660.20

## **SCHEDULE F (FECForm 3X)**

## ITEMIZED COORDINATED EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S)

_	HALF OF CANDIDAT	ES FOR	FEDE	HAL (	OFFICE		PAGE 35	5 / 36
	• • • •	used only by	Politica	al Commit	tees in the Gener	al Election)	FOR LINE	25 OF FORM 3X
	F COMMITTEE (In Full)							
Massach	usetts Republican State Congression	onal Committe	е					
coordinat	committee been designated to make ted expenditures by a political party	e committee?	Full Na	me of Subo	ordinate Committee	1		
	ame the designating committee:		Mailing	Address				
Scott Bro	own US Senate Committee, Inc		City			State	715	<sup>2</sup> Code
			City			State	· ZIF	Code
Full I	Name (Last, First, Middle Initial) of E	Each Payee				Purpose of Exper	nditure	
FTIN	I Solutions					telemarketing		Category/Type
Maili	ng Address					$\dashv$		
	E Jimmie Leeds Rd. #117					_		
City		State	)	ZIP Code		Date		
Nam	e of Federal Candidate Supported	NJ Office Soug	ht: I	08205 House	State: MA		0 3 Y	2010
	_			Senate	District:	Amount		
Scot	t Brown			Presidential	<u> </u>	- L		5373.80
	regate General Election enditure for this Candidate		67	6514.84		Transaction ID:	00317.E119	12
	Name (Last, First, Middle Initial) of E rietta Tow	Each Payee				Purpose of Exper political consul- ting	nditure	Category/Type
	ng Address Hunt Rd.					7		
City	nuni nu.	State	<del></del>	ZIP Code		1		
	ndaga	MI		49264		Date M M / D	D / Y	YYY
Nam	e of Federal Candidate Supported	Office Soug		House	State: MA	0.2 Amount	25	2010
Scot	t Brown			Senate Presidential	District:	- Amount		574.16
Aggr	regate General Election		67	6514.84	•			
Expe	enditure for this Candidate		07	0314.04		Transaction ID:	00317.E119	16
Full I	Name (Last, First, Middle Initial) of E	Each Payee				Purpose of Exper	nditure	
McD	ermott Will & Emory					Legal Counsel		Category/Type
	ng Address 13th Street NW							
City		State	)	ZIP Code		Date		
	hington	DC		20005		M M / D		YYY
Nam	e of Federal Candidate Supported	Office Soug		House Senate	State: MA	- 0.2 Amount	0 8	2010
Scot	t Brown		-	Presidential	District:	- Amount	3	00.000
	regate General Election enditure for this Candidate		67	6514.84		Transaction ID:		
							250/7	06
SUBTO	TAL of Expenditures This Page (op-	tional)			<b>&gt;</b>	<u> </u>	35947	.50

## **SCHEDULE F (FECForm 3X)**

# ITEMIZED COORDINATED EXPENDITURES MADE BY POLITICAL PARTY COMMITTEES OR DESIGNATED AGENT(S) ON BEHALF OF CANDIDATES FOR FEDERAL OFFICE

(2 U.S.C. §441a(d)) (To be used only by Political Committees in the General Election)

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NAME OF COMMITTEE (In Full)					
Massachusetts Republican State Congressional Committe	tee				
Has your committee been designated to make coordinated expenditures by a political party committee?  X YES NO	Full Name of Subordinate Committee				
If YES, name the designating committee:	Mailing Address				
Scott Brown US Senate Committee, Inc	City	State ZIP Code			
Full Name (Last, First, Middle Initial) of Each Payee		Purpose of Expenditure			
Victory Enterprises		Political consulting Category/Type			
Mailing Address 5200 S.W. 30th St., Ste. 7					
City State Davenport IA	52802	Date   M M / D D / Y Y Y Y Y O D D / 2 O 1 0			
Name of Federal Candidate Supported Office Sough	X Senate District:	0.2 0.3 2.0.1.0 Amount			
Scott Brown	Presidential	11540.56			
Aggregate General Election Expenditure for this Candidate ▶	676514.84	Transaction ID: 00317.E11941			
SUBTOTAL of Expenditures This Page (optional)	<b>&gt;</b>	11540.56			
TOTAL This Period (last page this line number only)		47488.52			